



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, PACIFIC TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL.: 587-0460 FAX: 587-0470

RECEIVED

1445
WAL

LOBBYIST REGISTRATION FORM

(See back of this form for instructions)

(Type or Print Clearly)

PART I LOBBYIST

NAME (Last)	(First)	(Middle)	TELEPHONE
MORRIS	GEORGE	A	808/531-4551
MAILING ADDRESS (Street)	(City)	(State)	(Zip Code)
222 S. VINEYARD ST., STE. 401	HONOLULU	HI	96813-2453
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
G.A. MORRIS, INC.			808/531-4551
MAILING ADDRESS (Street)	(City)	(State)	(Zip Code)
222 S. VINEYARD ST., STE. 401	HONOLULU	HI	96813-2453

PART II ORGANIZATION

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE		
WAL-MART STORES, INC.	501/273-4510		
MAILING ADDRESS (Street)	(City)	(State)	(Zip Code)
702 SW 8TH STREET	BENTONVILLE	AR	72716-0150
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
MELODY T. BUTAY			808/531-4551
MAILING ADDRESS (Street)	(City)	(State)	(Zip Code)
222 S. VINEYARD ST., STE. 401	HONOLULU	HI	96813-2453

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operations & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (Indicate below) |
| <input type="checkbox"/> Ecology, Energy, Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | |

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

(Signature of Lobbyist)

(Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED		
BOB MCADAM	GOVERNMENT RELATIONS		
NAME OF ORGANIZATION (if applicable)	TELEPHONE		
WAL-MART STORES, INC.	501/273-4510		
MAILING ADDRESS (Street)	(City)	(State)	(Zip Code)
702 SW 8TH STREET	BENTONVILLE	AR	72716-0150
I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.			
(Signature of Authorizing Officer or Person Represented)			(Date)
Robert T. McAdam			1/17/03